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CERTIFICATE OF MAILING

Thereby certify that the below listed items are being deposited with the U.S. Postal Service as first class mail in an envelope addressed to:

**Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450**

on

5-2-05

Jeffrey R. Kuester

In Re Application of:

Malik, Dale W.

Serial No.: 09/725,719

Filed: November 30, 2000

Confirmation No.: 1248

Group Art Unit: 2142

Examiner: Vu, Thong H.

Docket No.: 190252-1710

For: **Method and Apparatus for Minimizing Storage of Common Attachment Files in an E-Mail Communications Server**

The following is a list of documents enclosed:

Return Postcard
Amendment Transmittal
Fee Transmittal
Credit Card Authorization - Authorizing \$180.00
Third Response
Information Disclosure Statement
PTO-1449
Cited References A-D

Further, the Commissioner is authorized to charge Deposit Account No. 20-0778 for any additional fees required. The Commissioner is requested to credit any excess fee paid to Deposit Account No. 20-0778.

Customer No.: **38823**

AMENDMENT TRANSMITTAL LETTER (LARGE)

Applicant(s): Malik, Dale W.

Docket No.

190252-1710

Serial No.
09/725,719

Filing Date
November 30, 2000

Examiner
Vu, Thong H.

Confirmation No.
1248

Group Art Unit
2142

Invention: **Method and Apparatus for Minimizing Storage of Common Attachment Files in an E-mail Communications Server**

Commissioner for Patents
Mail Stop Amendment
P.O. Box 1450
Alexandria VA 22313-1450

Transmitted herewith is Third Response and Information Disclosure Statement in the above-identified application.

The fee has been calculated and is transmitted as shown below

CLAIMS AS AMENDED

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	19 -	20 =	0	X \$50.00	\$0
INDEP. CLAIMS	3 -	3 =	0	X \$200.00	\$0
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				\$360.00	\$0
EXTENSION FEE	1 ST MONTH <input type="checkbox"/> \$120.00	2 ND MONTH <input type="checkbox"/> \$450.00	3 RD MONTH <input type="checkbox"/> \$1,020.00	4 TH MONTH <input type="checkbox"/> \$1,590.00	\$0
Other Fees: Information Disclosure Statement					\$180.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$180.00

- ☐ No additional fee is required.
- ☐ Please charge Deposit Account No. _____ in the amount of _____
- ☐ A check in the amount of _____ to cover the filing fee is enclosed. A duplicate copy of this page is enclosed.
- ☒ A Credit Card Payment Form PTO-2038 is attached in the amount of \$180.00 (for IDS).
- ☒ The Director is hereby authorized to charge any deficiencies of the above fees or credit any overpayment to Deposit Account No. 20-0778.

Jeffrey R. Kuester, Reg. No. 34,367

5-7-05
Date